

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | NH       | 7234   | 03-30-00 |
| O.I.P.E. CLASSIFIER       |          | 48     | 4/3/02   |
| FORMALITY REVIEW          | DM       | 70203  | 6-5-00   |
| RESPONSE FORMALITY REVIEW | NH       | 617    | 10-15-01 |

# INDEX OF CLAIMS

✓ ☐ Rejected  
☐ Allowed  
 (Through numeral) ☐ Canceled  
☐ Restricted  
 N Non-elected  
 I Interference  
 A Appeal  
 O Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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Best Available Copy